

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

**FILED**  
**Apr 29, 2009**  
**Secretary of State**

DOCUMENT# B97000000404

**Entity Name:** S.K.A. FARMS, LLLP, LTD.

**Current Principal Place of Business:**

3101 FAIRLANE FARMS ROAD  
#2  
WELLINGTON, FL 33414

**New Principal Place of Business:**

200 NW AVENUE L  
BELLE GLADE, FL 33430

**Current Mailing Address:**

PO BOX 1370  
LOXAHATCHEE, FL 33470

**New Mailing Address:**

FEI Number: 65-0767601      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOWICKI, MARK J ESQ  
480 MAPLEWOOD DRIVE, STE 2  
JUPITER, FL 33458      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: THOMPSON, JOSEPH E., JR., TRUSTEE  
Address: 3101 FAIRLANE FARMS ROAD #2  
City-St-Zip: WELLINGTON, FL 33414  
Document #:  
Name: THOMPSON, KAY H TRUSTEE  
Address: 3101 FAIRLANE FARMS ROAD #2  
City-St-Zip: WELLINGTON, FL 33414

**ADDRESS CHANGES ONLY:**

Address: PO BOX 1370  
City-St-Zip: LOXAHATCHEE, FL 33470  
Address: PO BOX 1370  
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: KAY H. THOMPSON

GP

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date